

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000020845

**Entity Name:** NORMAN LOVE CONFECTIONS-NAPLES LLC**Current Principal Place of Business:**3747 TAMIAMI TRAIL N  
NAPLES, FL 34103**Current Mailing Address:**11380 LINDBERGH BLVD.  
FT MYERS, FL 33913 US**FEI Number:** 27-5037419**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HF REGISTERED AGENTS, LLC  
1715 MONROE STREET  
FORT MYERS, FL 33901 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** ERIN E. HOUCK-TOLL, VICE PRESIDENT

03/10/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER, PRESIDENT
Name	LOVE, NORMAN R
Address	11380 LINBERGH BLVD
City-State-Zip:	FT MYERS FL 33913
Title	MANAGER
Name	SOULE, TRAVIS
Address	11380 LINDBERGH BOULEVARD
City-State-Zip:	FORT MYERS FL 33913
Title	VICE PRESIDENT, ASSISTANT SECRETARY
Name	JACOB, NOAH
Address	11380 LINDBERGH BOULEVARD
City-State-Zip:	FORT MYERS FL 33913

Title	MANAGER, VICE PRESIDENT, SECRETARY
Name	JACOB, ADAM M
Address	11380 LINDBERGH BOULEVARD
City-State-Zip:	FORT MYERS FL 33913
Title	VICE PRESIDENT, ASSISTANT SECRETARY
Name	JACOB, ARNOLD
Address	11380 LINDBERGH BOULEVARD
City-State-Zip:	FORT MYERS FL 33913

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NORMAN R LOVE

MANAGER

03/10/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date